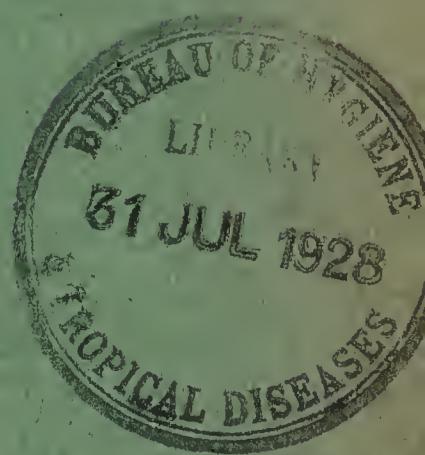


C.I.

NOTES

ANNUAL SANITARY REPORT

BOROUGH OF MANSFIELD.



ANNUAL REPORT  
ON THE  
*Sanitary Conditions of the District*  
AND  
HOUSING REPORT

For the year ended 31st December, 1927,

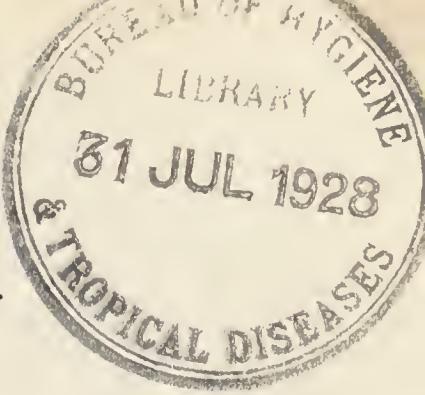
By

JAMES E. WILSON, M.D., B.Ch., D.P.H.,  
Medical Officer of Health.

MANSFIELD:  
PRINTED BY KING & BIRD, LEEMING STREET,  
1928.



BOROUGH OF MANSFIELD.



## ANNUAL REPORT

ON THE

# *Sanitary Conditions of the District*

AND

## HOUSING REPORT

*For the year ended 31st December, 1927,*

*By*

JAMES E. WILSON, M.D., B.Ch., D.P.H.,  
Medical Officer of Health.

---

MANSFIELD:  
PRINTED BY KING & BIRD, LEEMING STREET,  
1928.

## HEALTH COMMITTEE.



*Chairman:*

Alderman D. H. MALTBY, J.P.

---

*Deputy Chairman:*

Alderman J. MARRIOTT, J.P.

---

Alderman W. SINGLETON, J.P.

*Councillors:*

H. BOSWORTH,

T. PEMBLETON,

H. DANIEL,

Mrs. E. E. WAINWRIGHT, J.P.,

W. R. G. HAYWOOD,

T. WHALLEY,

T. KNAPTON,

G. C. WILMOT.

## PUBLIC HEALTH STAFF.

---

**STAFF.**—The Members of the Public Health Staff are:

<i>Medical Officer of Health</i>	...	J. E. WILSON, M.D., D.P.H.
<i>Assistant Medical Officer of Health</i>		JESSIE SMITH, M.B., D.P.H.
<i>Senior Sanitary Inspector</i>	...	BERNARD ALLMAN, Cert. R.S.I., Cert. in Meat Inspection.
<i>Assistant Inspector</i>	...	HERBERT ALLSOP, Cert. R.S.I., Cert. in Meat Inspection.
<i>Assistant Inspector</i>	...	Wm. T. T. GLASSBROOK, Cert. R.S.I., Cert. in Meat Inspection.
<i>Senior Health Visitor</i>	...	Miss H. A. HUNT, 3 years' general training, C.M.B. Cert.
<i>Health Visitor</i>	...	Miss P. GOODWIN, 3 years' general training, C.M.B. Cert.
<i>Health Visitor</i>	...	Miss F. HARRISON, 3 years' general training, C.M.B. Cert.
<i>Clerk</i>	...	E. V. HARDWICK; also acts as Bacteriological Laboratory Assistant.
<i>Clerk</i>	...	Miss D. ROBERTS, half time to Maternity and Child Welfare and half to School Medical work.
<i>Disinfector</i>	...	GEORGE PLOUGHMAN.



PUBLIC HEALTH DEPARTMENT,  
EXCHANGE ROW,  
MANSFIELD.

*To the Mayor, Aldermen and Councillors of the  
Borough of Mansfield.*

*Gentlemen,*

*I beg herewith to submit my seventh Annual Report, for the year 1927.*

*As laid down in Ministry of Health's Circular 834, par. 3, the Report this year is of an "ordinary" character, that is to say, it is less comprehensive than the Full Survey Report which appears as a rule at intervals of five years.*

*Owing to non-renewal of lease we had to leave our Welfare Centre which has been established at 56, Leeming Street since November, 1918.*

*The new premises at 15, St. John Street will, I think, be a distinct acquisition to the work of the Maternity and Child Welfare Department. A brief description of these premises is contained in this Report.*

*The legislation which governs the Public Health Service seems to add each year various new duties to the accumulated activities of the past. This should be, and must be so, if Public Health is to maintain its progressive character.*

*To the whole of my Staff, and to fellow officials in other Departments, I accord my grateful thanks for their splendid assistance in carrying on the work of this Department.*

*I have to thank you also for the close co-operation and sympathetic support so generously given in all matters affecting the Public Health of the Borough.*

*I am, Gentlemen,*

*Your obedient Servant,*

**JAMES E. WILSON.**



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## STATISTICAL SUMMARY.

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### 1.—GENERAL STATISTICS.

Area (acres) ... ... ... ... ... ...	7,068
Population (Census 1921) ... ... ... ...	45,190
„ (Estimated Mid-year 1927) ... ...	48,140
Number of Inhabited Houses (Census 1921) ... ...	9,095
„ Families or separate Occupiers (Census 1921) ...	9,483
Rateable Value (Land and Houses) ... ...	£250,369
Sum represented by a Penny Rate ... ...	£950

### 2.—EXTRACTS FROM VITAL STATISTICS.

Births:—	Total	Males	Females
Legitimate ... ... ...	798	430	368
Illegitimate ... ... ...	37	19	18

Birth-rate:—17.3 per 1,000 population.

Illegitimate Birth-rate:—0.76 per 1,000 population.

Deaths (nett):—496.

Death-rate:—10.3 per 1,000 population.

Infantile Mortality-rate:—76.6 per 1,000 births.

Deaths of infants under one year of age:—

Total	Legitimate	Illegitimate
64	55	9

Deaths from Measles (all ages) ... ...	Nil
„ Whooping-cough (all ages) ...	Nil
„ Diarrhoea (under two years)	1

These figures are extremely gratifying. The two former cannot be improved upon. The latter gives a rate per 1,000 births of 1.2, and should be compared with the figures for England and Wales, as shown in Table V. This figure, to my mind, indicates a clean town, carefully supervised food supply, and an efficient Maternity and Child Welfare service.

## SOCIAL CONDITIONS.

---

Coal mining is the chief occupation of the district, and at various points in the surrounding locality new sinkings are going on. This is a comparatively new coalfield—a very rich one—and already the town is being surrounded by a ring of rapidly growing colliery villages, a factor which must contribute to a large expansion of the population of the Borough and to its value as a shopping centre.

The staple industries within the Borough are boot and shoe making, decorated tin box making, cotton doubling, hosiery manufacture, engineering and the manufacture of artificial silk products.

The 1926 strike is still having an effect on the wages of the district, although the distress arising from this cause has not been so acute here as in many other districts intimately dependant on the coal-mining industry.



## VITAL STATISTICS.

### BIRTHS.

During the year 835 births were registered, giving a birth-rate of 17.3 per 1,000 per annum. These were:—

	Males	Females	TOTAL
Legitimate ...	430	368	798
Illegitimate ...	19	18	37
TOTALS ...	449	386	835

This birth-rate creates another low record, although it is higher than that of the country as a whole (16.7).

“Natural Increase”—this is the excess of births over deaths during the year. This amounts to 339.

### DEATHS AND DEATH-RATE.

NETT DEATHS belonging to the Borough ...	496
DEATH-RATE (all ages) per 1,000 population—	10.3
GENERAL DEATH-RATE for England and Wales—	12.3

This rate is the same as last year. It is considerably below that of the country as a whole.

A full list of the causes of death will be found in Table III.

The following causes of death were higher in 1927 than in 1926:—

Influenza,  
Tuberculosis,  
Heart Disease.

The following causes of death were lower in 1927 than in 1926:—

Scarlet Fever,  
Diphtheria,  
Cerebral Haemorrhage,  
Bronchitis,  
Pneumonia,  
Encephalitis Lethargica,  
Cancer,  
Deaths from Violence.

The principal causes of death are shown in order of frequency in the following Table:—

Cause	Number	Mortality Rate per 1,000
Heart Disease ... ... ... ...	76	1.57
Pneumonia ... ... ... ...	53	1.10
Tuberculosis (all forms) ... ...	44	.91
Cancer ... ... ... ...	36	.72
Congenital Debility, etc. ... ...	34	.70
Influenza ... ... ... ...	32	.66
Violence ... ... ... ...	27	.56
Cerebral Haemorrhage ... ...	26	.53

Last September the General Register Office, Somerset House, issued a National Life Table for England and Wales based on the 1921 Census, which reveals many interesting facts regarding the expectation of life at various age periods and under the varied conditions of the Country and of the large Towns.

The probability of a child dying in its first year of life has decreased by 40% during the fifteen years 1906-1921. This means that over 30,000 more babies survived their first twelve months

in 1921 than in 1906. While this figure only represents diminished deaths one is justified in concluding that at the same time less illness created a general raising of vitality during that period and afterwards.

The problem of the means of preservation of Infant Life will no doubt yield further to the efforts which are being made to solve it.

Another interesting fact is that married women of middle age have a better chance of long life than have either single women or widows. The rate of mortality for widows is invariably heavier than that for single women or wives.

Married life is evidently healthier than single life. This also applies to married men.

The question of whether to live in town or country seems to find some solution in these figures, rural districts showing a more favourable mortality-rate when compared with County Boroughs. This lowered death-rate was more noticeable amongst males than females.

All these improved conditions are attributable to the progress of modern hygiene and the development of child care stimulated by a more enlightened mental attitude of the public with regard to the causation and prevention of disease.

## CANCER.

Last year 54 deaths were attributable to this disease; this year 36. This is an encouraging decrease.

Age and sex incidence, together with parts affected, will be found in the following Table.

## CANCER DEATHS.

AGE	MALES		FEMALES		Bowels	Glands	Liver	Stomach	Lung	Uterus	Rectum	Scrotum & Prostate	Breast	Bladder	Mouth	Pancreas	Ovaries
	MALES	FEMALES	MALES	FEMALES													
18	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
26	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
28	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
37	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
42	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
44	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
45	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
46	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
50	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
51	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
52	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
55	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
56	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
57	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
58	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
59	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
60	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
61	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
64	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
65	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
67	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
73	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
78	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
80	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	19	17	7	3	3	4	2	1	2	1	3	1	5	2	2	2	2

Local stimulus has been given to the Cancer problem by the formation of a Nottinghamshire Council of the British Empire Cancer Campaign. The inaugural meeting was held in the middle of December, so that it is impossible to tabulate results in this Report.

Its formation will no doubt lead to not only an increase of research work in the district, but also will draw attention to the need of publicity in regard to the elemental facts of this disease.

It is only through early discovery that this disease holds out hope of cure.

The Departmental Committee on Cancer published during the year the sixth of its series of Memoranda on this subject. This particular Memo. deals with Cancer of the Womb, and emphasises the need of an early diagnosis in order to secure a hopeful expectation of recovery.

There can be little doubt that in most instances the cancerous process begins without producing any symptoms which could lead to suspicion of the presence of a very serious form of disease. Those symptoms, however, which should induce women to seek appropriate treatment at a stage when the disease may be eradicated should be known.

Where any doubt exists a skilled local examination should be made. Where the diagnosis can be shown to be negative, peace of mind will replace anxiety. On the other hand, the benefits of an early diagnosis are incalculable as regards hope of recovery. Knowledge of operative technique in these cases is developing rapidly, and our knowledge of the effect on the tissues of such new weapons as radium is being constantly added to.

The means for effective treatment exist, the problem is that of bringing the patients within their sphere.

### **INFANTILE MORTALITY-RATE.**

Sixty-four deaths occurred in children under 12 months of age, this giving an infantile mortality-rate of 76.6 per 1,000 births.

Of these 64 were legitimate children and 9 illegitimate, so yielding the following rates:—

*General infantile mortality-rate*—76.6 per 1,000 births.

*Legitimate infantile mortality-rate*—68.9 per 1,000 legitimate births.

*Illegitimate infantile mortality-rate*—243.2 per 1,000 illegitimate births.

Complete causes of infantile deaths are tabulated in Table IV. This matter is further discussed under the heading of Maternity and Child Welfare.

## LOCALISED CAUSES OF ILLNESS.

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Influenza was somewhat prevalent during the months of January and February. Other epidemic disease was conspicuously absent however.

There was a brief recurrence of the mild form of Small-pox which has been prevalent in the surrounding districts of Nottinghamshire, Derbyshire and Yorkshire since 1923.

This is referred to in a later part of the Report.

The aftermath of the 1926 strike has not yet passed. Wages have been low and no commensurate fall in the cost of living has taken place. In spite of this, however, I think that health conditions generally have been well maintained.

Mansfield suffered during the summer from a very noticeable absence of sunshine. While this was not by any means confined to this town or district, it should I think be noted as quite an important factor in the health of the year which has just closed. Many of the complaints experienced as a direct result can only be described as "Minor Maladies." There is no doubt, however, that prolonged absence of sunshine, especially at that time of the year when it is normally expected, gives rise to physical and mental depression and creates a lowered vitality which carries with it a diminished resistance to the invasion of disease. Under the stimulating influence of sunshine there is a general improvement of our whole physical and mental well-being.

The Sherwood Colliery Company, with a view to obtaining some reliable data in regard to the effect of artificial sunshine on their workers, have equipped a Sun-ray Clinic close to the pit-head. This seems to open up a new avenue in industrial hygiene, and the results of this experiment will be awaited with much interest.

## GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

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The following Hospitals are provided or subsidised by the Local Authority or by the County Council:—

### 1.—Tuberculosis.

The responsibility for treating this disease rests with the County Council. The Ransom Sanatorium is situated amongst pine woods about three miles from the Borough. Accommodation consists of 130 beds, 50 of which are for males, 40 for females, and 40 for children.

### 2.—Maternity.

No Maternity Hospital has been provided, but one bed is retained in the Mansfield Hospital by the Maternity and Child Welfare Committee for the treatment of complicated maternity cases. The terms on which this bed is held are 6s. per day during each day of occupation, 5s. per week while not occupied, together with the doctor's fee in each case of £2 2s. 0d. With the growth of our population, and the overcrowded condition of so many houses, I would tender for consideration the suggestion that the provision of a small Maternity Home would meet a very real want in connection with our Maternity and Child Welfare Scheme.

### 3.—Children's Hospital.

There is no Children's Hospital in the Borough; the Mansfield and District Hospital contains Children's Wards (32 beds).

### 4.—Fever Hospital.

The Forest Fever Hospital is situated on the outskirts of the Borough on a site of 4 acres 2 roods and 12 perches, which was purchased in 1894. An extension of the buildings occurred in 1915, and as they now stand these buildings consist of a Central Administrative Block, three blocks for the treatment

of infectious diseases, one of which is for Scarlet Fever and one for Diphtheria. The third is an Observation Block and has 4 single-bed wards for the isolation of doubtful cases or cases of cross-infection which have arisen in other wards.

The Hospital is designed to accommodate 32 patients with provision of 2,000 cubic feet of air space per head.

Further details as to the number of cases treated will be found in another portion of this Report.

### **5.—Small-pox Hospital.**

Cases are sent to Spital Hospital, under the North Derbyshire Hospital Board.

### **6.—Other Hospitals.**

THE UNION HOSPITAL, situated in Mansfield, has 164 beds; 77 of these are for females, including the maternity department, and 87 for males. This is under the control of the Poor Law Guardians.

MANSFIELD AND DISTRICT HOSPITAL.—This Hospital has a total number of 108 beds, which are allocated as follows:—

Medical 25.	Surgical 51.	Children 32.
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### **Unmarried Mothers.**

An annual subscription is voted to the Mansfield and District Society for the Help and Protection of Girls, which is able to secure beds for approved cases, but apart from this there is no institutional provision for unmarried mothers and illegitimate children in the area. Homeless children are received into the Union Infirmary.

### **Ambulance Facilities.**

(a) FOR INFECTIOUS CASES.—A Motor Ambulance is provided for this purpose and is garaged at the Hospital Lodge.

(b) FOR NON-INFECTIOUS AND ACCIDENT CASES.—An Ambulance has been provided by the British Red Cross Society and is maintained by the Borough. One or two of the surrounding Authorities contribute to the cost of upkeep.

## CLINICS AND TREATMENT CENTRES.

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### MATERNITY AND CHILD WELFARE CENTRES.

#### In Mansfield.

The former Welfare Centre held at 56, Leeming Street, has during 1927, owing to termination of lease, been transferred to 15, St. John Street.

These premises were purchased (1927) for the sum of £1,262. The following is a brief description of the premises:—

#### ON GROUND FLOOR—

- (a) Women's Dining Room;
- (b) Health Visitors' Writing Room and Record Room for filing reference cards, etc.;
- (c) Dispensary, for sale of food and medicaments;
- (d) Health Visitors' Treatment Room;
- (e) Kitchen, Larder and Scullery.

#### ON FIRST FLOOR—

- (a) Large Weighing Room;
- (b) Waiting Room;
- (c) Doctor's Consulting Room.

These three rooms are all connected, and so a patient can enter the weighing room, pass directly to waiting room, and from there enter the doctor's consulting room. When leaving she passes to the corridor which leads to the main staircase.

These premises are very much better arranged, and are in every way more suitable than our former.

The weighing room was made as large as possible but at times it is very crowded, otherwise the premises fulfil every requirement at present. The position is also a very central one.

### **In Pleasley Hill.**

This Centre occupies the St. Barnabas' Church Schoolroom, Pleasley Hill. It is conducted once a week, on Monday afternoons.

### **DAY NURSERIES.**

There are no day nurseries provided.

### **SCHOOL CLINICS.**

The Mansfield School Clinic occupies premises at Redcliffe House, Ratcliffe Gate, where Consultation Clinics, Minor Ailments Clinic, Dental Clinic, Eye Clinic, and Ringworm Clinic, are held.

### **TUBERCULOSIS DISPENSARY.**

There is a Tuberculosis Dispensary under the control of the Nottinghamshire County Council, at West Hill House, Mansfield. It is attended by a Specialist Medical Officer twice a week.

### **VENEREAL DISEASE.**

A Venereal Diseases Clinic is also under the supervision of the County Council and conducted at West Hill House. Two days a week are set aside for males and females. An Irrigation Clinic is held daily.

## PUBLIC HEALTH OFFICERS OF THE LOCAL AUTHORITY.

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A list of these will be found as a preface to this Report. These are all wholly employed by this Authority.

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## PROFESSIONAL NURSING IN THE HOME.

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(a) Generally this is discharged by members of the District Nursing Association or by nurses who are on the staff of Nursing Homes. A grant of £20 is made annually to the local District Nursing Association.

(b) FOR INFECTIOUS DISEASES.—There is no scheme for home nursing of infectious diseases.

## MIDWIVES.

No Midwives are employed by this Authority. The number of Midwives practising in the area is 15.

## CHEMICAL WORK.

Specimens from this Authority are sent to the Public Analyst, City of Nottingham.

Analyses under the Sale of Food and Drugs Act are conducted by the Nottinghamshire County Council.

I am much indebted to the Chief Analyst to this Authority for a regular quarterly report upon the articles analysed by him which are taken in the district of the Borough of Mansfield.

A summary of Statistics from this source will be found elsewhere.

## LEGISLATION IN FORCE.

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### Special Acts of Parliament.

Mansfield Commissioners' Gas Act, 1878.

Mansfield Corporation Act, 1901 (Royal Assent 26th July, 1901.)

Mansfield Corporation Act, 1905 (Royal Assent 11th July, 1905.)

Electric Lighting Order, 20th June, 1899.

Electric Lighting Order, 2nd August, 1907.

The Mansfield Corporation Gas Order, 1924.

The Mansfield Corporation Act, 1925 (*See Note Below.*)

### List of Acts of Parliament.

Adopted by the Council, and the dates on which they came into force in the District:—

Public Health (Water) Act, 1878, sections 6 and 7.

Order of the Local Government Board, dated 6th December, 1889.

Public Libraries Acts.

Infectious Disease (Prevention) Act, 1890, 1st July, 1892.

Public Health Acts Amendment Act, 1890, parts 2, 3, 4 and 5, 1st July, 1892.

Baths and Wash-houses Acts, 9th November, 1892.

Private Street Works Act, 1892, 25th March, 1894.

Notification of Births Act, 1907, 1st January, 1909.

Public Health Acts (Amendment) Act, 1907, sections 21, 22, 32 (Part II.), 35, 46, 50 (Part III.), 63, 64 (Part IV.) and 95 (Part X.), 13th January, 1922.

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The Mansfield Corporation Act, 1925, received Royal Assent on 7th August, 1925. Its chief provisions were summarised in my last Annual Report.

## SANITARY CIRCUMSTANCES OF THE AREA.

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### WATER.

The water supply of the Borough is derived from the Bunter formation by means of two deep wells.

The supply of water is constant. As well, it possesses an extremely high degree of organic purity and is very palatable.

Bacteriological reports are obtained quarterly from the University of Manchester, and these shew that the water is of a very high standard of bacterial purity. The estimated domestic supply within the Borough is 19 gallons per head per day, and for all purposes 25 gallons per head per day.

The following outside Authorities receive a supply from this undertaking:—

1. Mansfield Woodhouse.
2. Pleasley and New Houghton.
3. Tibshelf and Newton.
4. Clipstone.

### RIVERS AND STREAMS.

The River Maun passes through the town. The upper reaches of this river are fed by the King's Mill Reservoir, which receives the effluent of the Sutton-in-Ashfield Sewage Scheme.

Constant patrol work is done by my Inspectors to check the pollution of the river as it passes through the town.

### DRAINAGE AND SEWERAGE.

There are three sewage disposal works dealing with the sewage matter of the Borough. These were also described in detail in my 1925 Report.

## DRAINS AND SEWERS.

The main sewers in the town are very old.

New drainage work and extensions have recently been completed in several areas where new buildings have been in course of erection.

## CLOSET ACCOMMODATION.

In November, 1923, I submitted a report on the subject of conversion of pail closets and privy-middens within the Borough, and a Sub-Committee was appointed to deal with this matter.

**Pail Closets.**—In June, 1924, a scheme was approved whereby the owner of property contributed towards the cost of conversion £4 per closet, the owner, in addition, bearing any necessary expenditure on structural alterations. This offer was made to the owners of property within reasonable distance of a sewer and water supply. When this offer was made there were 300 convertible pail closets; a few more were subsequently unearthed, bringing up this number to 312.

At the close of 1927, 252 conversions had been carried out by the Corporation, and 26 had been carried out by owners, making a total of 278.

This left at the end of the year 34 further conversions to be carried out, and of these 27 had made a conditional promise to have the work carried out in 1928.

**Cost of Conversion.**—The average cost of Conversion to the Corporation (278 conversions) was £4 0s. 11d. per conversion.

There can be no doubt that this is money very soundly invested, and that the health standards of the town are certain to reflect the success of this scheme. I can only hope that

next year I shall be able to record the total extinction of the pail closet.

Those isolated specimens beyond the seweraged area are as a rule in such isolated positions that they can do little harm.

**Privy-middens.**—One more privy-midden was brought under conversion. This means that of the 43 convertible privy-middens (within the seweraged area and with a water supply available), 32 have now been connected to water carriage. The use of another has been discontinued.

The remainder are on old properties, most of them under negotiation for street improvement, and so one can confidently anticipate that in the near future these will also disappear.

## **SCAVENGING.**

The destructor was closed down during the year for eight weeks, during which it underwent considerable repair work and improvement. A new air-blast was introduced, and thus its capacity for destruction was greatly improved.

The estimated cost of this reconstruction was £2,165.

Since resuming its activities a much larger amount of refuse can now be disposed in this way.

## **SMOKE ABATEMENT.**

Observation of factory chimneys have been regularly made during the year.

With the exception of one or two chimneys there has been nothing to complain of in regard to pollution by black smoke.

Where nuisance has occurred visits have been made to the works and interviews have been held with the owners and boiler-men. This has usually led to improvement.

## SLAUGHTER-HOUSES.

Ten slaughter-houses are at present occupied in the Borough. Of these, four are registered and six licensed.

The slaughter-house accommodation in the town is still insufficient, and several existing slaughter-houses are much below standard requirements.

Most of these slaughter-houses are situated in very old premises. To make way for various improvements, three in use last year have been pulled down.

Those which remain are consequently very overcrowded. One is used by nine butchers and another by six. It is very difficult to supervise the proper maintenance of a slaughter-house where so many butchers make use of it.

All slaughter-house premises should have the lower six feet of wall finished off in impermeable material such as glazed brick.

It would seem to me that some action must be taken as regards proper and adequate accommodation in the immediate future, as some of the present insufficient premises will probably shortly be pulled down in the course of further schemes of development.

## SCHOOLS.

The Medical Officer of Health acts as Chief School Medical Officer, so that the Public Health and School Medical Service are readily co-ordinated.

In addition to regular inspection of the school children the Public Elementary Schools are also inspected as to their sanitary arrangements and hygienic condition by the medical staff as well as by the Sanitary Inspector.

Each School is supplied with water from the Town Supply, and flushing closets are provided.

## HOUSING.

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### 1.—GENERAL HOUSING CONDITIONS OF THE AREA.

There is still a considerable shortage of housing accommodation as judged by the applications submitted for houses on the various Housing Estates.

Towards the end of the year, however, there have been very big Housing Schemes carried out in connection with the new coal sinkings in the surrounding area, and it is natural that when these new collieries come into production they may attract many families resident in the town into the new colliery villages.

During the past year the Bull Farm Estate has been practically completed, and a beginning has been made in the development of the Ravensdale Estate. This consists of 98 acres 2 roods 8 perches, situated in a very healthy, elevated part of the town. At the close of the year 47 houses had been erected on this Estate.

### 2.—OVERCROWDING.

An Enquiry with regard to conditions of overcrowding, which commenced at the end of 1927, was completed early in 1928. Extracts from this report are here included:—

#### “ Extent of the Enquiry.

The estimated number of houses based on the estimated mid-year (1927) population of Mansfield is 9,628.

For purposes of this Enquiry all streets and areas likely to exhibit conditions of overcrowding have been inspected, and a record has been made of such conditions in respect of 7,813 houses.

In the case of each house the total number of rooms and the number of bedrooms were set out in parallel columns, together with the number of occupants classed as “ Adults ” and “ Children.”

Notes were added re lodgers in each house and additional families.

### **“Standard of Overcrowding.**

Any dwelling having more than an average of two persons per bedroom of 600 cubic feet (air space), or three persons per bedroom of 900 cubic feet has been recorded as “overcrowded.”

The occupants have been classed as Adults and Children, the former being persons over 12 years of age. Two children have been considered, for purposes of classification, as one adult.

The number of lodgers in each house has been recorded inasmuch as lodgers will be found to use rooms other than those occupied by members of the family. In a house with a small number of rooms this increases the density of occupation in the other rooms.

### **“Number of Families in the house.**

Where two families occupy one house this increases the number of Adult occupants and consequently produces more overcrowding.

In classifying the conditions of overcrowding it is to be noted that the density of occupation has been gauged on the basis of bedrooms only, as in this district the kitchen (living-room) and parlour are not normally used as sleeping-places.

The above standard of air-space is sufficiently low. This is the standard laid down for Common Lodging-houses, and is based on the assumption that adequate ventilation by window and chimney is provided as well as kitchen and day-room accommodation.

The assumption that two children are equivalent to one adult is a convenient method of calculation, but it would be more accurate to express the equivalent relationships by saying

that an adult requires a minimum air-space of 300 cubic feet, whereas a child requires 250 cubic feet. From this more accurate standard five adults correspond to six children.

The number of houses selected for the purpose of this Enquiry is sufficiently large to give a reliable report.

Houses found to be overcrowded will be seen in the Table below:—

	Bedrooms.						
	1	2	3	4	Over 4	Total	
Total houses inspected	72	1,246	6,155	322	18	7,813	
Percentage distribution	0.9	15.9	78.8	4.2	0.2	—	
Normal occupied houses	40	1,019	5,732	303	17	7,111	
Overcrowded ... ...	9	96	264	11	—	380	
Seriously overcrowded	23	131	159	8	1	322	

From the above Table you will note that the PERCENTAGE DISTRIBUTION of overcrowding is as follows:—

	Total	1	2	3	4	Over 4	
Normal ... ...	91.0	55.5	81.8	93.1	94.1	94.4	
Overcrowded ...	4.9	12.5	7.7	4.3	3.4	—	
Seriously overcrowded	4.1	32.0	10.5	2.6	2.5	5.6	

#### “ Families per house.

1,140 houses have 2 families in the house.

23 houses have 3 families in the house.

3 houses have 4 families in the house.

Total houses occupied by more than one family 1,166.

On the Bull Farm Estate 91 houses have 2 families each and one house has 3. Out of 574 houses 16 are moderately overcrowded and 6 seriously overcrowded."

### 3.—FITNESS OF HOUSES.

The houses in the greater portion of the Borough are modern, but several areas in the older parts of the town are very defective in their construction, lighting and ventilation, etc. These will later form the basis of a further representation under the Housing of the Working Classes Act.

There has been a considerable volume of improvement as regards general hygienic conditions during the year. A large number of pail-closets and privies have been replaced by flushing water-closets, and a large number of dustbins have been provided, replacing ashpits.

### 4.—UNHEALTHY AREAS.

#### Clerkson's Alley Scheme.

The official representation pursuant to the provisions of Part I. of the Housing of the Working Classes Act, 1890, was made by your Medical Officer on 21st March, 1923, declaring this as an unhealthy area.

During the year 1926 the 72 houses required for re-housing the occupants of this area have been erected on the Reindeer Street site, and their occupation by the dispossessed tenants was completed during the past year.

The pulling down of all its cramped, derelict buildings and the erection of new premises, will, in this final stage of the Scheme, convince everyone of its wisdom and foresight. There is no question of the benefits to health which have accrued to the inhabitants of the new Reindeer (Re-housing) Estate.

**Number of new houses erected during the year:—**

(a) Total, including numbers given separately under (b)	240
(b) With State assistance under the Housing Acts—	
(1) By the Local Authority—	
Bull Farm Estate ... ... ... ...	20
Reindeer Estate ... ... ... ...	47
(2) By other bodies or persons ... ... ... ...	151
Houses not subsidised ... ... ... ...	22

**1. Unfit Dwelling-houses.**

Inspection:—

(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) ...	1285
(2) Number of dwelling-houses (included under sub-head 1 above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 ...	30
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ... ... ... ...	3
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation ...	124

**2. Remedy of Defects without service of Formal Notices.**

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers ... ... ... ...	1165
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**3. Action under Statutory Powers.**

*A.—Proceedings under Section 3 of the Housing Act, 1925:—*

(1) Number of dwelling-houses in respect of which notices were served requiring repairs ... ... ... ...	24
(2) Number of dwelling-houses which were rendered fit—	
(a) by owners ... ... ... ...	23
(b) by Local Authority in default of owners ...	—

(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	...	...	...	—
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*B.—Proceedings under Public Health Acts :—*

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	...	258
(2) Number of dwelling-houses in which defects were remedied—		
(a) by owners	...	233
(b) by Local Authority in default of owners	...	—

*C.—Proceedings under Sections 11, 14 and 15, Housing Act, 1925 :—*

(1) Number of representations made with a view to the making of Closing Orders	...	...	...	...	1
(2) Number of dwelling-houses in respect of which Closing Orders were made	...	...	...	...	1
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	...	...	...	...	—
(4) Number of dwelling-houses in respect of which Demolition Orders were made...	...	...	...	...	1
(5) Number of dwelling-houses demolished in pursuance of Demolition Orders	...	...	...	...	1

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## FACTORY AND WORKSHOP ACT, 1901.

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Total number of Workshops on the Register	...	...	183
Inspections made to Workshops and Factories	...	...	207

Five notices of occupation and five notices of nuisances have been received from H.M. Inspector during the year.

The following Table gives the sanitary defects found in workshops, workplaces and factories:—

Want of cleanliness	...	...	...	...	...	12
Want of ventilation	...	...	...	...	...	1
Sanitary accommodation insufficient		...	...	...	...	2
Sanitary accommodation unsuitable or defective	...		...	...	...	2
Sanitary accommodation not separate for sexes	...		...	...	...	1
Defective drainage	...	...	...	...	...	5
Defective roofs, etc.	...	...	...	...	...	2
						—
					Total	25
						—

Nine outworkers' lists were received from employers, notifying 26 outworkers.

All the outworkers' premises were inspected at least once during the year.

No case of infectious disease was notified at any of the outworkers' premises during the year.

**REPORT OF THE CHIEF SANITARY INSPECTOR  
TO THE MEDICAL OFFICER OF HEALTH.**

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DEAR SIR,

I have pleasure in submitting to you my thirteenth Annual Report.

**General Sanitation.**

A large amount of repair work has been done, including much that was outstanding at the end of the year 1927. This is very satisfactory.

**Conversion.**

The joint contributory scheme by the Corporation and Owners has progressed very favourably, very few pail closets within distance of the sewers remain to be converted.

The following statement gives the particulars of unsatisfactory methods of sewage and refuse disposal still remaining in the Borough:—

						Within distance of sewer.
Number of privies	...	...	...	58	9	
„	pail closets	...	...	103	34	
„	waste-water closets	...	...	56	—	
„	ashpits	...	...	261	—	

The conversion to recognised sanitary types of closets and ashpits during the last two years has been as follows:—

Year	Privies converted to W.C.'s	Pail closets converted to W.C.'s	Waste-water closets converted to W.C.'s	Ashpits replaced by regulation dustbins
1926	...	2	138	—
1927	...	1	12	—

## Milk Supply.

The number of milch cows kept in the Borough during the year show a decrease on last year, as will be seen by the following Table:—

		1926	1927
Number of cowsheds in use in the Borough	52	45	
„ milch cows in the Borough	298	289	
„ milk purveyors...	59	46	
„ milk wholesalers and producers	41	37	

During the year 95 inspections were conducted in regard to the premises of purveyors of milk.

There is one milk pasteurising factory in the Borough. This is worked in a very satisfactory way.

The cleanliness is of a very high order, and all that could be desired.

## Milk and Dairies Order, 1926.

During the year samples of milk have been tested for the presence of dirt with the Tustman sediment tester. When found dirty a letter has been sent to the purveyor and passed on by him to the producer. In most cases this has resulted in the farmer taking more precautions. The farms have also been visited at the time of milking.

## Meat and Food Inspection.

Much consideration and time has been devoted to this work, with good results, as will be seen from a perusal of the summary submitted herewith.

## SUMMARY OF WORK DONE.

Summary of work done, including that in connection with House-to-House Inspection on informal or statutory notices, etc., served for the abatement of nuisances, etc., as the result of inspections:—

				Number of Defects, etc., remedied on:	
				Informal Notices	Statutory Notices
Drains amended, repaired or re-constructed...	...	...	158	18	
Drains, w.c.'s and gullies cleansed ...	...	...	552	5	
Fall pipes and eaves spouts cleansed or repaired	...	...	161	16	
W.C.'s and privies repaired ...	...	...	123	15	
Additional w.c.'s provided ...	...	...	5	—	
Privies converted into w.c.'s ...	...	...	1	1	
Pail closets converted into w.c.'s ...	...	...	18	—	
Dry dustbins provided ...	...	...	498	31	
,,      ,,      in lieu of ashpits abolished ...	...	77	2		
Dilapidations repaired (including roofs, ceilings, walls and floors) ...	...	...	96	14	
Yards, passages or pavements repaired	...	...	238	26	
Defective light and ventilation	...	...	8	1	
Dirty premises limewashed and cleansed	...	...	30	—	
Over-crowding of dwellings abated ...	...	...	—	—	
Nuisances abated from keeping animals and fowls ...	...	23	4		
Smoke nuisances abated ...	...	...	15	—	
Manure and refuse removed ...	...	...	21	—	
Miscellaneous ...	...	...	92	1	
Total of defects remedied or nuisances abated	...	2,116	134		

Table showing premises inspected, notices served, complaints registered, notices complied with, etc.:—

Number of complaints registered	...	...	...	...	215
„ premises inspected	...	...	...	...	3,102
„ workshops inspected (F. and W. A.)	...	...	...	...	207
„ informal notices served...	...	...	...	...	1,130
„ „ „ complied with	...	...	...	...	1,073
„ notices served	...	...	...	...	146
„ „ „ complied with	...	...	...	...	122
„ inspections	...	...	...	...	5,659
„ houses inspected under Housing and Town Planning Act	...	...	...	...	150
„ houses inspected in which defects were found and office notices served	...	...	...	...	124
„ houses inspected in which defects were remedied without serving Closing Order	...	...	...	...	92
„ cases of infectious diseases investigated	...	...	...	...	487
„ articles of clothing, etc., disinfected	...	...	...	...	6,976

### Summary of Food Inspection.

The duties include the inspection of meat, fish, fruit, cowsheds and dairies, and all wholesale and retail premises where food is sold or prepared for sale.

## SURRENDERED AND DESTROYED:—

						Tons	cwts.	lbs.
Beef	...	...	...	...	...	1	8	31
Beef (imported)	...	...	...	...	...	0	10	23
Mutton	...	...	...	...	...	0	1	34
Pork	...	...	...	...	...	0	4	22
Edible organs	...	...	...	..	...	2	0	81
Tinned fruit and vegetables	...	...	...	...	...	1	16	103
Fish and game	...	...	...	...	...	0	4	69
Shell fish	...	...	...	...	...	0	6	18
Fruit (green)	...	...	...	...	...	0	1	72
Rabbits	...	...	...	...	...	0	2	103
Sausages	...	...	...	...	...	0	0	100
Corned beef and tongue	...	...	...	...	...	0	3	94
Bacon	...	..	...	..	...	0	0	97
Milk, 12 gallons	...	...	...	...	...	0	0	120
						—	—	—
					TOTAL	...	7	3
						—	—	71
						—	—	—

The following statement shows the number of carcases surrendered in addition to the above:—

			Carcases and Cause
Cows	...	..	5 Tuberculous
Heifers	...	...	1 ,,
Bullocks	...	...	1 ,,
Bullocks	...	...	1 Pyelo-nephritis Septicæmia
Calves	...	...	1 Osteomyelitis
Calves	...	...	1 Cholemia and Dropsy
Sheep	...	...	1 Fevered and Emaciation
Sheep	...	...	1 Nephritis and Dropsy
Pigs	...	...	2 Tuberculous
Pigs	...	...	1 Arthritis, Emaciation and Dropsy
Pigs	...	...	2 Uræmia and Nephritis

### Summary of Premises Inspected.

Slaughter-houses, butchers' and provision shops, fish shops and meat factories ... ... ... ...	1,941 visits
Dairies and cowsheds ... ... ... ...	154 ,,

### Slaughter-houses.

Ten slaughter-houses are at present occupied in the Borough. Three slaughter-houses have been closed during the year.

These are visited regularly at the time of slaughtering as required by the Public Health (Meat) Regulations, 1924.

Yours faithfully,

**BERNARD ALLMAN.**



## PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASE.

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### **Small-pox.**

Between 26th March and the end of August, 22 cases of Small-pox arose in the Borough.

Two of these cases were below school age—both unvaccinated. Eleven cases occurred amongst school children at ages as shown in the Table below:—

	6	7	8	9	10	11	12	13	Total
Boys	1	—	—	—	1	—	—	—	2
Girls	1	1	1	3	—	1	1	1	9

All of these children were unvaccinated.

Of the remaining nine adult cases seven were unvaccinated. Two men, aged 53 and 54 years respectively, had been vaccinated in infancy only.

Small-pox is a disease which requires very prompt and vigorous action in regard to following up contacts. Interchange of information as regards the movements of contacts helps to keep them under a uniform inspection during the period of quarantine.

In case of an outbreak of this disease in school I have come to regard the school itself as a most valuable clearing-house for the contacts. The scholars are advised to continue to attend, and are merely divided into two groups—vaccinated and unvaccinated. Lists of these are made out at once, and copies handed to the teacher. To the former little attention need be paid. The unvaccinated group are seen in school daily, and all absentees are

visited each day at their homes. The lists are checked over every day with the assistance of the Head Teacher. Careful injunctions regarding such minor symptoms as headache are given, and all are impressed with the necessity to stay away on the occurrence of any symptoms. Those symptoms occurring at the week-end have to be reported direct to the Medical Officer of Health. The results of this procedure have been highly successful.

This procedure eliminates in one move those class contacts who will escape the infection, and in the present mild type of the disease are by far the most numerous group. The procedure indicated above is very much better than closure of class or school.

The cost of treatment of these 22 cases was £348 12s. Od. All of them were treated at Spital Hospital.

### **Scarlet Fever.**

Sixty-five cases of Scarlet Fever were notified during the past year. This is a very low incidence of this disease.

Below you will find a Table shewing the incidence of this disease since 1915, and from it you will see that we have maintained very low figures throughout the year.

The low incidence synchronises with a high percentage of Isolation Hospital treatment.

### **Diphtheria.**

Last year's very low level (18 cases) has been almost equalled in 1927.

Nineteen cases were notified and all of them were removed to Hospital.

This figure speaks well for the careful attention paid to all suspicious throat cases. I have always urged upon the prac-

titioners in the district to swab every case of sore throat and send it in for investigation to the Laboratory. This has been faithfully carried out, and to this I attribute our highly satisfactory immunity from this disease.

The Laboratory also controls the spread of the disease amongst the contacts. Each house is visited by myself or Dr. Smith, and each occupant is swabbed. We insist that no worker can return to work and no child from the home can return to school until the throat swab has been grown in the Laboratory, tested and found negative to the Klebs-Loeffler germ. From this method of control it should be noted that the disease has never assumed epidemic form.

This procedure again places any contacts who may have contracted the infection under immediate treatment. When treated from the beginning of the illness no disease yields more brilliantly satisfactory results than Diphtheria. In no other disease is the outlook so grave if early treatment is not obtainable.

#### **Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Regulations, 1926.**

These Regulations came into operation on 1st October, 1926. As well as laying down a new procedure for the notification of Puerperal Fever, these regulations make the condition therein defined as "Puerperal Pyrexia" also notifiable. This is defined as the occurrence of a temperature two degrees above normal within 21 days after child-birth or mis-carriage, such temperature being sustained over a period of 24 hours or recurring during that period.

The following cases were dealt with under the above regulations:—

## PUERPERAL FEVER AND PUERPERAL PYREXIA REGULATIONS, 1926.

The following cases were dealt with under the above Regulations:

Case No.	Age at Married or Separated	Date of Birth	Onset	Notification, with date	Cause or subsequent Diagnosis	Admission to Hospital	Discharged from Hospital	Period (days)	Cost of Treatment	Result		
1.	19	S.	1/ 9/27	4/ 9/27	P. Fever	..	..	5/ 9/27	24/12/27	110	£ 35 2 0	
2.	30	M.	16/ 1/27	18/ 1/27	P. Pyrexia	21/1/27	Septic stitch wound	..	—	—	Well in a few days.	
3.	26	M.	13/ 1/27	19/ 1/27	P. Pyrexia	21/1/27	Influenza	..	—	—	Well in a few days.	
4.	35	M.	20/ 1/27	26/ 1/27	P. Pyrexia	26/1/27	Pyrexia due to severe and prolonged twin pregnancy	..	—	—	Well in a few days.	
5.	26	M.	19/ 2/27	24/ 2/27	P. Pyrexia	24/2/27	Septic stitch wounds	..	—	—	Well in a few days.	
6.	26	M.	10/ 3/27	14/ 3/27	P. Pyrexia	19/3/27	Pelvie Cellulitis	..	18/ 4/27	28/ 5/27	40	14 2 0
7.	23	M.	20/ 5/27	23/ 5/27	P. Pyrexia	24/5/27	Puerperal Septicemia	..	25/ 5/27	12/ 6/27	18	7 4 0
8.	30	M.	16/ 6/27	18/ 6/27	P. Pyrexia	20/6/27	Pelvie Cellulitis	..	23/ 7/27	18/ 8/27	26	9 18 0
9.	29	M.	24/10/27	31/10/27	P. Pyrexia	2/11/27	Pyelitis (B. Coli)	..	—	—	—	
10.	31	M.	13/11/27	16/11/27	P. Pyrexia	17/11/27	Puerperal Septicemia	..	17/11/27	31/12/27	45	15 12 0

### NOTES ON THE ABOVE TABLE.

**Admissions to Hospitals.**—Five serious conditions were admitted to Hospital. As regards the actual marking of the Doctor's first notification, only in one instance was the original certificate marked with request for admission to Hospital. This was Case No. 10.

**Calling in of Consultants.**—One case only was notified with a request for the calling in of a Consultant.

**Home Nursing.**—No requests were made for the provision of a Trained Nurse in the home.

**Attendance at Ante-Natal Clinic.**—None of the cases on the above notified list had prior to confinement attended the Ante-Natal Clinic.

**Age Period of Attack.**—The average age of the five cases, Nos. 1, 3, 7, 8, 10, attacked by Puerperal Sepsis, is 25.8 years.

**CONCLUSIONS.**—The Puerperal Pyrexia Notification is most valuable, inasmuch as the Medical Man in attendance has no need to hesitate as regards notification.

The febrile condition may be a mere incident in the puerperium or a serious complication of it.

By completing a Puerperal Pyrexia Notification he is at once in touch with all the means for establishing an early diagnosis and providing the requisite Home or Institutional treatment.

Recovery from Puerperal Septicemia is so rare that attention is drawn to Case No. 10, which is expected to complete her recovery next year.

## Measles and Whooping Cough.

No deaths occurred from Measles or Whooping Cough.

## Chicken-pox.

This disease remained notifiable throughout the year, and yielded 248 notifications.

## Tuberculosis.

Particulars of new cases and deaths from this disease in the area will be found below:—

Age Periods	NEW CASES				DEATHS			
	Pulmonary		Non- Pulmonary		Pulmonary		Non- Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year	—	—	1	—	—	—	—	1
1 to 5 years	—	—	1	—	—	—	—	—
5 to 10 „	4	1	—	—	—	—	1	—
10 to 15 „	6	3	3	1	1	—	—	—
15 to 25 „	10	7	—	2	3	4	1	—
25 to 35 „	3	4	—	2	3	5	2	—
35 to 45 „	6	7	2	—	3	6	—	—
45 to 55 „	2	7	1	—	4	4	2	—
55 to 65 „	1	2	—	—	2	1	—	—
Over 65 „	—	—	—	—	—	—	1	—
TOTALS ..	32	31	8	5	16	20	7	1

## Notification of Tuberculosis.

Sixty-six per cent. of cases dying from Tuberculosis had previously been notified. This is an improvement on last year's figure—62%.

Quite a number of the "not previously notified" tubercular cases die in hospitals or mental institutions, the disease being one of the determining causes of death, but having developed

within the Institutional period. Such cases are referred back to the last known place of residence, and consequently go to make up this group.

### **Public Health (Prevention of Tuberculosis) Regulations, 1925.**

No action has been necessary in regard to tuberculous employees in the milk trade.

### **Public Health Act, 1925, Section 62.**

Compulsory removal to hospital under this section has not been found necessary.

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## **VENEREAL DISEASE.**

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The responsibility for carrying out treatment in this group of diseases rests with the County Council, who have established a Venereal Centre at West Hill House. The facilities provided for diagnosis, treatment and consultation are quite adequate. Cases known or suspected of suffering in this way are referred from my School Clinics and Welfare Centres, and every facility has been granted in regard to the diagnosis and treatment of such cases.



## MEANS OF PREVENTION OF INFECTIOUS DISEASES.

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### FOREST HOSPITAL REPORT.

The most important factor in the control of Infectious Disease is the Isolation Hospital. Our most potent weapons against the spread of Diphtheria are careful swabbing and examination of all suspicious sore throats and all contacts of actual cases, together with isolation of persons affected.

How our Hospital has met these requirements will be seen from the following Table:—

Years	Population	SCARLET FEVER				DIPHTHERIA				Total No. of patients treated	Patient days	Patients in Hospital: Daily Average
		Total No. of cases notified	Attack rate per 1000 population	No. of cases admitted to Hospital	Per cent. of total notifications	Cases notified	Attack rate per 1000	Admission to Hospital	Per cent. of notifications			
1915	40,208	148	3.6	63	42.6	87	2.1	5	5.7	84	—	—
1916	41,038	134	3.2	87	64.9	130	3.1	9	6.9	103	3932	10.8
1917	41,868	80	1.9	55	68.7	60	1.4	35	58.3	110	4206	11.5
1918	42,698	47	1.1	44	93.6	37	0.8	30	81.0	95	4219	11.6
1919	43,528	52	1.1	47	90.4	54	1.2	37	68.5	95	3537	9.7
1920	44,358	77	1.7	63	81.8	54	1.2	39	72.2	130	4173	11.3
1921	45,190	257	5.7	171	66.5	33	0.7	27	81.8	212	7473	20.5
1922	46,020	109	2.3	82	75.2	34	0.7	30	88.2	154	6403	17.3
1923	46,850	106	2.2	96	90.6	43	0.9	39	90.7	158	7122	19.5
1924	47,680	139	2.9	128	92.1	56	1.1	51	91.0	214	8675	23.7
1925	47,000	101	2.1	96	95.0	31	0.6	28	90.3	134	5211	14.2
1926	47,270	62	1.3	57	91.9	18	0.3	18	100	101	3954	10.8
1927	48,140	65	1.3	64	98.4	19	0.4	19	100	99	4173	11.4

This Table refers to Mansfield cases only. As well two cases of Scarlet Fever and one of Diphtheria were treated at the request of the Urban District of Mansfield Woodhouse.

A complete tabulation of the work of the Hospital will be found below:—

		Remaining in Hospital, 1st Jan., 1927	Admissions	Discharges	Deaths	Remaining in Hospital, 31st Dec., 1927
Scarlet Fever	...	5	66	65	—	6
Diphtheria	...	1	20	20	1	—
Enteric Fever	...	—	2	2	—	—
Erysipelas	...	—	2	2	—	—
For Diagnosis	...	—	2	2	—	—
Measles	...	—	1	—	1	—

### Average Stay in Hospital.

Scarlet Fever cases	...	...	...	53.5 days
Diphtheria cases	...	...	...	36.25 days
Enteric Fever cases	...	...	...	38.0 days

### Cost of Food.

The total food bills for the year amounted to £632 15s. 3d.

Total patient days	...	...	...	4,173
Total staff days	...	...	...	5,729
				—
			Total	9,902
				—

so that the daily average cost of food for patients and staff amounted to 1s. 3.3d.

### Deaths in Hospital.

Two deaths occurred. One of these was a child who died from Measles 24 hours after admission from the Mansfield and District Hospital, where he had been operated on for Empyema following Pneumonia.

The second death was from Diphtheria. This case was admitted to the Hospital on the sixth day of the disease. To late treatment I attribute the result in this case.

### Return Cases.

There was one return case of Scarlet Fever, none of Diphtheria. (N.B.—A "return" case is one occurring in the same household within 28 days of the return of a previous case from Isolation Hospital.)

Four cases had a second attack of Scarlet Fever in Hospital during the convalescent period of the first attack.

Full details of hospital staff and equipment were included in my survey report of 1925.



## BACTERIOLOGICAL LABORATORY.

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During the year the bacteriological examination of water was in the hands of the Manchester University, and quarterly examinations from each of the wells at Clipstone and Rainworth were made.

Diphtheria swabs, material suspected of containing the tubercle bacillus, and certain other pathological specimens were examined in the Laboratory at the Public Health Office by the Medical Officer of Health, who was ably assisted in this work by Mr. E. V. Hardwick. This officer has had a great deal of experience in this work, and is perfectly competent to carry on the routine in the absence of the Medical Officer.

During the year the serological examination of blood in suspected cases of Enteric Fever was carried out in addition to the ordinary microscopical examinations.

Analysis of work carried out in the Bacteriological Laboratory during the year 1927:—

		Positive	Negative	TOTAL
Diphtheria	...	66	407	473
T.B. Sputum	...	18	35	53
Ringworm	...	18	9	27
Enteric Fever	...	2	8	10
Gonorrhœa	...	6	6	12
Syphilis	...	—	1	1
Anthrax	...	—	5	5
Miscellaneous	...	10	42	52
 TOTALS	...	120	513	633
		—	—	—

## MATERNITY AND CHILD WELFARE.

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The general scheme for provision of treatment of mothers and children was dealt with in detail in my 1925 report. This report also included a description of the premises in Mansfield and Pleasley Hill used for Welfare purposes.

I shall pass on to deal with some of the statistics arising out of the work of this department.

### **Births.**

The following Table will show the uncorrected number of births registered during the year:—

	Males	Females	TOTAL
Residents ... ...	439	368	807
Non-Residents ...	17	15	32
	456	383	839

### **Corrected Births.**

The following Table is supplied by the Registrar-General and represents nett births:—

	Males	Females	TOTAL
Legitimate ...	430	368	798
Illegitimate ...	19	18	37
	449	386	835

### Notification of Births.

842 births were notified during the year.

12 cases were un-notified:—

10 attended by doctors.

2 attended by midwives.

### Illegitimate Birth-rate.

Thirty-seven illegitimate births were registered, giving an illegitimate birth-rate of .76 per 1,000 population.

### Still-births.

Fifty-two cases of still-birth were notified, of which eight were non-residents.

### Infantile Death-rate.

76.6 per 1,000 children born.

The total number of infant deaths during the year was 64, of which 38 were males and 26 females. Of these infantile deaths nine were illegitimate.

Infantile deaths had the following Ward distribution:—

North Ward (including Pleasley Hill) ..	21
(Of these, two occurred in Pleasley Hill.)	
South Ward ... .. .. .. ..	17
East Ward .... .. .. .. ..	20

N.B.—Six additional infantile deaths were “inward transfers.”

### Attendances at Centres.

The attendances at the afternoon weighing Clinics were as follows:

#### 15, S. JOHN STREET (102 Sessions):—

				Numbers attending	Number of attendances
Infants	...	...	...	728	4,641
Nursing Mothers	...	...	...	359	2378
Children, one to five years			...	464	2,291
Ante-natal (46 Sessions)	...		...	76	156
				—	—
<b>TOTALS</b>			...	<b>1,627</b>	<b>9,466</b>
				—	—

#### PLEASLEY HILL (46 Sessions):

Infants	...	...	...	60	731
Expectant Mothers	...	...	...	7	30
Nursing	„	...	...	106	335
Children, one to five years			...	105	910
				—	—
<b>TOTALS</b>			...	<b>278</b>	<b>2,006</b>
				—	—

### Attendances at the Medical Officer's Consultations.

			PLEASLEY	
			MANSFIELD	HILL
			(102 Sessions)	(46 Sessions)
Infants	...	...	457	140
Expectant Mothers	...	...	105	7
Nursing	„	...	34	86
Children, one to five years			527	308
Ante-natal	...	...	156	—
			—	—
<b>TOTALS</b>		...	<b>1,279</b>	<b>541</b>
			—	—

**Treatment provided at Centres.**

		Numbers attending	Number of attendances
Infants, Ophthalmic cases	...	50	605
„ other cases	...	145	1,108
Children, one to five years, Ophthalmic cases	...	40	239
Children, one to five years, other cases	...	103	1,029
Expectant Mothers	...	—	—
Nursing „	...	6	26
<b>TOTALS</b>	<b>...</b>	<b>344</b>	<b>3,007</b>

The total number of attendances made during the year were :

Cases attending	Number of attendances
2,249	14,479

**Feeding of Necessitous Mothers.**

Year		Mothers Attending	Dinners Served to Mothers	Dinners Served to Children	Total
1925	...	39	2,491	1,527	4,017
1926	...	94	4,298	1,753	6,051
1927	...	60	1,971	883	2,854

Total number of dinner sessions 250, as compared with 267 in the previous year.

The ladies of the Voluntary Committee, and the Caretaker who acts as cook, worked very hard in order to deal with all necessitous cases.

## Health Visitors' Visits.

Visits paid by Health Visitors during the year were:

Visits to Infants	...	...	...	...	3,774
,, Children, one to five years	...	...	...	...	2,238
,, Expectant Mothers	...	...	...	...	175
,, Special cases <sup>Measles and Whooping-cough</sup>	...	...	...	...	79
Investigation of Still-Births	...	..	...	...	44
,, Infant Deaths	...	...	...	...	58
Visits to cases of Ophthalmia Neonatorum	...	...	...	...	38
Miscellaneous visits	...	...	...	...	31
Special Nursing Cases	...	...	...	..	172
<b>TOTAL</b>	<b>...</b>	<b>...</b>	<b>...</b>	<b>...</b>	<b>6,609</b>

## Venereal Diseases.

Nine suspected cases were sent to the County Council's Clinic for diagnosis. Three of these gave a positive result.

## Eye Cases.

Twenty-seven cases were referred to Mr. Reid for examination and necessary treatment.

## Ophthalmia Neonatorum.

Notified	CASES					Deaths	
	Treated		Vision unimpaired	Vision impaired	Total Blindness		
	At home	Infant Welfare or Hospital					
14	Nil	14	Nil 14.	Nil	Nil	Nil	

## Midwives.

There are 15 practising Midwives in the Borough, 14 certificated and one registered. Ten of these are resident in the Borough.

## Deaths in Child-birth.

Four maternal deaths occurred during the year. One of these died in hospital from Puerperal Sepsis, another was due to Hæmorrhage following Abortion, the third was due to post-partum Hæmorrhage. I have no record of the fourth case which occurred (in a Mansfield resident) outside the district.

## Maternity Bed.

Several cases were admitted to the bed retained for the use of complicated cases of pregnancy.

## Progress in Welfare Work.

The following Table will give a comparative idea of the number of mothers and children availing themselves of advice at the Welfare Centres:—

Year				Number Attending	Attendances
1915	...	...	...	162	...
1916	...	...	...	391	...
1917	...	...	...	514	...
1918	...	...	...	859	...
1919	...	...	...	934	...
1920	...	...	...	1,330	...
1921	...	...	...	1,663	...
1922	...	...	...	1,702	...
1923	...	...	...	1,873	...
1924	...	...	...	1,758	...
1925	...	...	...	1,919	...
1926	...	...	...	2,471	...
1927	...	...	...	2,249	...

The slight fall in this year's figures are due to the abnormal number of attendances during the 1926 strike.

## Infantile Mortality.

The following Table will show our relative position in regard to this figure:—

Year		England and Wales		155 Comparable Towns (Population 20,000 to 50,000)		Mansfield
1920	...	80	...	80	...	104.6
1921	...	83	...	84	..	78.2
1922	...	77	...	75	...	61.5
1923	...	69	...	69	..	92.9
1924	...	75	...	71	...	82.1
1925	...	75	...	74	...	76.9
1926	...	70	...	67	...	89.1
1927	...	69	...	68	...	76.6

The complete causes of infantile mortality are tabulated in Table IV.

## Causes of Infantile Mortality.

The two chief respiratory diseases, Bronchitis and Pneumonia, account for 21 deaths out of a total number of 64. One cannot but wonder how many of these deaths might have been prevented.

I fear that Bronchitis is much too lightly regarded by many mothers. Its fatal character in some cases and its liability to develop into the much more serious Broncho-pneumonia are, I fear, much under-estimated.

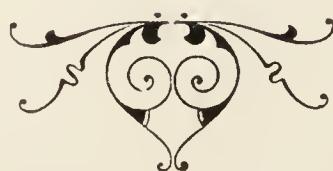
Children are occasionally brought to my Welcomes with a most obvious Bronchitis, the mother often announcing the diagnosis before the child has been examined. Even cases of Broncho-pneumonia have been carried in, or have walked into the Welfare Centre. No such child should be taken to a Welcome. Such exposure in inclement weather is rendering the outlook of recovery very grave.

All such cases should be immediately put to bed, kept in an equable temperature and the doctor called in to attend.

**Prematurity (15 cases).**—This is the largest single cause to which these early infantile deaths are attributable. Children born before the normal intra-uterine life is complete are, we know, liable to a low survival-rate. The causes of premature birth are however difficult to determine. The health and habits of the expectant mother are no doubt closely related to the normal period of gestation.

Improper feeding is in most cases the cause of deaths from Convulsions, but these are not excessive (four deaths).

Compared with last year's figure we can show improvement, compared with the Country as a whole our rate is not at all satisfactory.



## SALE OF FOOD AND DRUGS ACT AND THE MILK AND CREAM REGULATIONS.

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The County Council are the Authority for the carrying out of the provisions of the above Acts.

By the courtesy of the Chief Analyst to the Nottinghamshire County Council I submit a report of the result of the analyses of articles of food taken within the Borough of Mansfield during the year 1927.

Articles		Samples	Correct	Incorrect	Result
Arrowroot	...	1	1	—	Genuine
Bread	...	3	3	—	„
Butter	...	5	5	—	„
Brandy	...	1	1	—	„
Barley Kernels	...	1	1	—	„
Cocoa	...	2	2	—	„
Coffee	...	2	2	—	„
Demerara Sugar	...	1	1	—	„
Flour, self-raising	...	1	1	—	„
Flour of Sulphur	...	1	1	—	„
Ground Ginger	...	1	1	—	„
Ground Almonds	...	2	2	—	„
Gin	...	5	5	—	„
Licorice Powder	...	1	1	—	„
Margarine	...	1	1	—	„
Milk	...	54	46	8	8 Adulterated
Milk, Condensed	...	2	2	—	Genuine
Sponge Cakes	...	2	2	—	„
Sausage, pork	...	1	1	—	„
Tapioca	...	1	1	—	„
Tincture of Iodine		1	1	—	„
Whisky	...	13	13	—	„
Rolled Oats	...	1	1	—	„

**Number of Informal Samples of Milk tested by Inspectors  
by "Gerber" Tester:—**

	Correct	Incorrect	Total
Number of samples taken by Inspectors...	184	10	194
Number submitted by milk retailers and producers to the Inspectors ...	465	10	475
TOTALS ...	649	20	669



TABLE I.  
Vital Statistics of whole District during 1927 and previous years.

Year	Population estimated to middle of each year	Births		Total Deaths registered in the District		Nett Deaths belonging to the District		Under One year of age		Rate per 1000 nett Births	
		Nett		At all ages		Number		Number			
		Number	Rate	Number	Rate	Number	Rate	Number	Rate		
1919	44447	981	963	20.8	594	13.3	476	10.7	91	94.5	
1920	46219	1303	1291	27.9	496	10.7	415	9.0	135	104.6	
1921	45190	1182	1163	25.7	578	12.8	490	10.8	91	78.2	
1922	45770	1010	991	21.6	525	11.4	416	9.0	61	61.5	
1923	46270	1028	1012	21.9	619	13.3	492	10.6	94	92.9	
1924	46760	977	962	20.5	594	12.7	461	9.8	78	82.1	
1925	47000	961	936	19.9	585	12.4	433	9.2	72	76.9	
1926	47270	901	875	18.5	576	12.1	487	10.3	78	89.1	
1927	48140	839	835	17.3	606	12.5	496	10.3	64	76.6	

TABLE II.  
Cases of Infectious Disease notified during the year 1927.

NOTIFIABLE DISEASE	CASES NOTIFIED IN WHOLE DISTRICT										TOTAL CASES NOTIFIED IN EACH LOCALITY						TOTAL CASES REMOVED TO HOSPITAL	
	At Ages—years										North Ward, including Pleasley Hill			Pleasley Hill alone				
At all ages	Under 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 and over	65 and over	65 and over	65 and over	65 and over		
Small-pox . . . . .	22	1	—	1	2	—	4	2	3	—	3	1	16	4	4	2	22	
Scarlet Fever . . . . .	65	—	1	1	2	4	31	9	7	1	—	—	27	9	15	23	64	
Diphtheria . . . . .	19	—	—	—	1	—	6	4	1	—	1	—	—	—	—	—	19	
Enteric Fever . . . . .	3	—	—	—	—	—	—	—	1	—	1	—	1	—	—	2	3	
Erysipelas . . . . .	20	—	—	—	—	—	—	—	1	1	5	9	3	—	9	6	5	
Puerperal Fever . . . . .	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	
Puerperal Pyrexia . . . . .	9	—	—	—	—	—	—	—	—	8	1	—	—	—	—	3	3	
Ophthalmia Neonatorum . . . . .	14	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	4	
Encephalitis Lethargica . . . . .	4	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	2	
Poliomyelitis . . . . .	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	
Pulmonary Tuberculosis . . . . .	63	—	—	—	—	—	—	—	5	99	8	—	—	—	—	—	—	
Other Tuberculous Diseases . . . . .	13	1	—	—	—	—	—	—	—	4	1	3	12	1	1	17	16	
Pneumonia (all forms) . . . . .	49	1	2	2	—	—	7	1	9	6	7	—	—	—	—	2	8	
Chicken-pox . . . . .	248	13	16	12	16	21	153	15	1	1	—	—	79	—	2	72	97	
<b>TOTALS . . . . .</b>	<b>533</b>	<b>30</b>	<b>19</b>	<b>17</b>	<b>22</b>	<b>29</b>	<b>211</b>	<b>47</b>	<b>32</b>	<b>54</b>	<b>29</b>	<b>36</b>	<b>7</b>	<b>189</b>	<b>18</b>	<b>152</b>	<b>192</b>	<b>133</b>

Cases which were Non-Residents :— Erysipelas . . . . . 2  
Puerperal Fever . . . . . 2  
Ophthalmia Neonatorum . . . . . 1  
Encephalitis Lethargica . . . . . 1  
Pneumonia . . . . . 2

**TABLE III.**  
**Causes of Death; Civilians only.**

TABLE IV.  
Infant Mortality during the year 1927.

Nett Deaths from stated causes at various ages under One year.

CAUSE OF DEATH		Under 1 week	1—2 weeks	2—3 weeks	3—4 weeks	Total under 4 weeks	4 weeks and under 3 months	3 months and under 6 months	6 months and under 9 months	9 months and under 12 months	TOTAL DEATHS UNDER 1 YEAR
ALL CAUSES	Certified ..	16	3	2	4	25	12	11	7	6	61
	Uncertified ..	2	..	..	..	2	..	1	..	..	3
1	Measles ..	..	..	..	..	..	..	..	..	..	..
2	Whooping-cough	..	..	..	..	..	..	..	..	..	..
3	Diphtheria	..	..	..	..	..	..	..	..	..	..
4	Influenza	..	..	..	..	..	..	..	1	1	2
5	Erysipelas	..	..	..	..	..	..	..	..	..	..
6	Tuberculous Meningitis	..	..	..	..	..	..	..	..	..	..
7	Tuberculosis, Intest.	..	..	..	..	..	..	..	..	..	..
8	Other Tuberculous Diseases	..	..	..	..	..	..	..	1	..	1
9	Syphilis ..	..	..	..	..	..	..	..	..	..	..
10	Rickets ..	..	..	..	..	..	..	..	..	..	..
11	Meningitis (not Tuberculous) ..	..	..	..	..	..	..	..	..	..	..
12	Convulsions ..	..	..	1	..	..	1	2	1	..	4
13	Bronchitis ..	..	..	..	..	..	..	2	2	2	7
14	Pneumonia (all forms)	..	..	..	..	..	3	4	3	4	14
15	Other Respiratory Diseases	..	..	..	..	..	..	1	..	..	1
16	Gastritis ..	..	..	..	..	..	..	..	..	..	..
17	Diarrhoea ..	..	..	..	..	..	..	..	..	..	..
18	Hernia, Intestinal Obstruction	..	..	..	..	..	..	..	..	..	..
19	Malformation ..	..	..	..	1	..	1	..	..	..	1
20	Debility, Sclerema	..	..	2	..	2	1	5	3	4	12
21	Icterus ..	..	..	..	..	..	..	..	..	..	..
22	Premature Birth ..	..	13	..	..	1	14	1	..	..	15
23	Injury at Birth ..	..	..	..	..	..	..	..	..	..	..
24	Disease of Umbilicus ..	..	..	..	..	..	..	..	..	..	..
25	Atelectasis ..	..	..	..	..	..	..	..	..	..	..
26	Lack of Care ..	..	..	..	..	..	..	..	..	..	..
27	Suffocation, in bed ..	..	..	..	..	..	..	1	..	..	1
28	Other violence ..	..	..	..	..	..	..	..	..	..	..
29	Other causes ..	..	..	2	2	..	2	6	..	..	6

TABLE V.

## Birth-rate, Death-rate and Analysis of Mortality during the year 1927.

(Provisional figures. Populations estimated to the middle of 1927 have been used for the purposes of this Table.)

	ANNUAL DEATH-RATE PER 1,000 POPULATION	RATE PER 1,000 BIRTHS										
		All causes	Enteric Fever	Small-pox	Measles	Scarlet Fever	Whooping-cough	Influenza	Violence	Diarrhoea and Enteritis, under 2 years	Total Deaths under 1 year	
England and Wales .. ..	16.7	12.3	0.01	0.00	0.09	0.01	0.09	0.07	0.57	0.51	6.3	6.9
107 County Boroughs and Great Towns, including London ..	17.1	12.2	0.01	0.00	0.12	0.01	0.10	0.08	0.49	0.46	8.3	71
155 Smaller Towns (1921 adjusted Populations 20,000—50,000) ..	16.4	11.3	0.01	0.00	0.07	0.01	0.08	0.05	0.58	0.41	5.0	68
London .. .. ..	16.1	11.9	0.01	0.00	0.04	0.01	0.12	0.09	0.39	0.51	7.5	59
MANSFIELD .. .. ..	17.3	10.3	0.02	0.00	0.00	0.00	0.00	0.02	0.66	0.56	1.2	76.6









